



EMPLOYMENT APPLICATION

(Fork in the Road, Inc., Verde Valley Restaurants, Inc., The Prescott Office, LLC.)

An Equal Opportunity Employment Employer

NAME _____

LAST

FIRST

MIDDLE

ADDRESS _____

HOME PHONE _____ CELL PHONE _____ SOC. SEC. # _____

Are you 16 years of age or older? _____

If hired, can you show proof of your legal right to work in the United States? _____

JOB INTEREST

POSITION DESIRED _____

SALARY DESIRED _____ LOCATION DESIRED _____

PART TIME _____ FULL TIME _____ DATE AVAILABLE TO START _____

Have you worked for the company before? _____ If yes, FROM: _____ TO: _____

Do you have relatives, or live with anyone, who works for the company? _____ If so, who? _____

If yes, and employed in this position, would you be in a supervisory or subordinate role to a relative? _____

How did you hear about this job? _____

Do you have reliable transportation to get to work? _____ yes _____ no

Have you ever worked for any of our affiliated companies such as: The Prescott Office, The Dambar, Murphy's Grill, Murphy's Grill Cottonwood, Gurley Street Grill, or Desert Ridge Office Restaurant and Bar?

If yes, then where? _____ City, State, Zip _____

Dates Worked: _____ Supervisor's Name: _____

Have you ever been counseled/disciplined for cash handling violation? _____ yes _____ no

Have you ever been counseled/disciplined for being late/absent from work or school? _____ yes _____ no

Have you been convicted of a felony in the last seven (7) years? ___ Yes ___ No (A prior conviction will not necessarily bar employment.) If yes, please explain: _____

Please list the times and dates you are available to work.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							

This Employer complies with federal and state law prohibiting discrimination in employment because of sex, age, race, color, religion, marital status, national origin, ancestry, medical condition, disability, and other protected categories, which are now named or may be added in the future.

EDUCATION AND TRAINING

LIST ALL EDUCATION OR TRAINING WITH PRESENT OR MOST RECENT FIRST\

Name of School City, State	Dates Attended	Degree/Diploma Received? (Y/N)	Type of Course or Major

EMPLOYMENT HISTORY

List most recent employer first. (Attach additional sheet if needed.)

DATE	NAME AND ADDRESS OF EMPLOYER	1. JOB TITLE 2. NAME OF SUPERVISOR 3. SUPERVISOR'S TELEPHONE NUMBER	DESCRIBE MAJOR DUTIES	WAGES	REASON FOR LEAVING
FROM: MO. YR. TO: MO. YR.		1. 2. 3.		STARTING \$ _____ PER _____ FINAL \$ _____ PER _____	
FROM: MO. YR. TO: MO. YR.		1. 2. 3.		STARTING \$ _____ PER _____ FINAL \$ _____ PER _____	
FROM: MO. YR. TO: MO. YR.		1. 2. 3.		STARTING \$ _____ PER _____ FINAL \$ _____ PER _____	

REFERENCES

List three school, business or personal references that you give permission for us to contact. They should not be related to you.

NAME	ADDRESS AND PHONE NUMBER	EMPLOYER AND PHONE NUMBER	OCCUPATION	HOW LONG KNOWN

PRE-EMPLOYMENT STATEMENT

I declare my answers to the questions on the application are true. I authorize investigations of all statements in this application. I understand an investigative report may be made from information obtained through personal interviews with third parties, (family members, business associates, financial sources, friends, neighbors) with whom I am acquainted. I further understand that any misrepresentation or omission of facts given may be cause the application to be void or for immediate discharge, if hired. I accept that as a matter of company policy, employment is at the will of the employee and the employer and may be terminated at any time with or without cause or notice.

I hereby acknowledge that the company may provide all such information to its parent company and affiliates and to other third parties. I hereby authorize consent to such sharing of information with the company's parent company and affiliates and other third parties. I hereby release from liability and responsibility the company, parent company and it's affiliates and any other parties who may be the recipients of such information.

APPLICANT SIGNATURE _____ **DATE** _____